

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

ROBERT STEELE
1055 N 400 E
NEPHI UT 84648

PB 4/24/07
2. Article Number
(Transfer from service label)

50030063
50230015
50270084
50270092

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Robert Steele* ☐ Agent
☒ Addressee

B. Received by (Printed Name) *Robert Steele* C. Date of Delivery *5-11-07*

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

7004 2510 0004 1824 8989

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

U.S. Postal Service™

CERTIFIED MAIL™ RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

PB 4/24/07 50030063

Postage	\$	50230015
Certified Fee		50270084
Return Receipt Fee (Endorsement Required)		50270092
Restricted Delivery Fee (Endorsement Required)		

Total Postage

Sent To **ROBERT STEELE**
1055 N 400 E
NEPHI UT 84648

City, State, Z

PS Form 3800, June 2002

See Reverse for Instructions